

Type or print all responses. Attach additional sheets as necessary. Return completed and signed declaration to: Indiana Department of Insurance, 311 W. Washington Street, Suite 300, Indianapolis, IN 46204.

- | STATE | LICENSE NUMBER AND STATUS |
|-------|---------------------------|
|       |                           |
|       |                           |
|       |                           |
|       |                           |
|       |                           |
|       |                           |

- [illegible]

8. Have you (or any officer or director in the case of a corporate applicant) ever been convicted of or are you currently charged with committing a crime, whether or not adjudication was withheld?  
“Crime” includes a misdemeanor, felony, or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses.  
“Convicted” includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence, or a fine.

\_\_\_\_\_ YES \_\_\_\_\_NO

If you answer yes, you must attached to this declaration:

- a) a written statement explaining the circumstances of each incident;
- (b) a copy of the charging document; and
- (c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

9. Have you (or any officer or director in the case of a corporate applicant) ever been involved in an administrative proceeding regarding any professional or occupational license or the business of viatical settlements or life insurance?  
“Involved” means having a license censured, suspended, revoked, canceled, terminated; or being assessed a fine, placed on probation or surrendering a license to resolve an administrative or arbitration proceeding which is related to a professional or occupational license. “Involved” also means having a license application denied or the act or withdrawing an application to avoid a denial. You may exclude termination due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

\_\_\_\_\_ YES \_\_\_\_\_NO

If you answer yes, you must attached to this declaration:

- a) a written statement explaining the circumstances of each incident;
- (b) a copy of the charging document; and
- (c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

10. Have you (or any officer or director in the case of a corporate applicant) ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?

\_\_\_\_\_ YES \_\_\_\_\_NO

If you answer yes, you must attached to this declaration:

- a) a written statement explaining the circumstances of each incident;
- (b) a copy of the charging document; and
- (c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

11. Identify all viatical settlement providers that have paid commissions to you during the previous 12 months or with which you intend to transaction business during the next 12 months.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

I \_\_\_\_\_ intend to act as a viatical settlement broker or viatical settlement  
[name of applicant]  
agent in Indiana. I have read and understand IC 27-8-19.8 and 760 IAC 1-61. I understand that a viatical settlement broker is deemed to represent only the viator's interests and shall owe a fiduciary duty to the viator to act according to the viator's instructions and in the viator's best interests. I understand that a viatical settlement broker may not seek or obtain any compensation from the viator without the written agreement of the viator obtained before the broker performs any services in connection with the transaction. I understand that a viatical settlement agent is deemed to represent only the viatical settlement provider. A viatical settlement agent may not seek or obtain any compensation from viator in connection with the transaction.

I hereby certify under penalty of perjury that the above information is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
Relationship to applicant if applicable

